

995920

NOTICE OF INTENTION
TO HOLD HOSPITAL LIEN

Notice is hereby given that St. Mary Medical Center, whose principal addresses are 540 Tyler Street, Gary, Indiana and 1500 South Lake Park Avenue, Hobart, Indiana, intends to hold a Hospital Lien for all reasonable and necessary charges for the hospital care, treatment or maintenance rendered to the Patient named herein, in accordance with the provisions of I.C. 32-8-26-6, et seq.. Said lien shall attach to any cause of action, suit or claim accruing to said Patient, or in the event of the Patient's death, to his legal representative, because of the illness or injuries that gave rise to the cause of action, suit or claim, and necessitated the hospital care, treatment or maintenance referred to herein.

- 1. Patient Name and Address: Sharon McDaniel - 786 N. 450 W., Hobart, IN 46342
- 2. Operator of Hospital: John Birdzell, 540 Tyler St., Gary, IN
- 3. Date of Admission: July 8, 1988
- 4. Date of Discharge: July 13, 1988
- 5. Amount Due For Hospital Charges: \$5,811.58
- 6. Names and Addresses of all persons whom Patient, his Personal Representative or his Attorney claims is responsible for payment of the Damages arising from the illness or injury causing this Hospital Admission:

<u>NAME</u>	<u>ADDRESS</u>
<u>Unknown</u>	

- 7. Name and Address of Patient's Attorney: Attorney John C. Mullins - 3 Plaza Building, Chicago, IL

I affirm, under the penalties for perjury, that I am authorized to execute this Instrument, and that the foregoing statements and representations are true and correct.

Date: August 31, 1988

ST. MARY MEDICAL CENTER

By: Robert W. Walker
(Signature)

Its Attorney
(Title)

cc: INDIANA DEPARTMENT OF INSURANCE
311 West Washington Street, Suite 300
Indianapolis, IN 46204-2787

LILLIAN A. BLASTICK
RECORDER, LAKE COUNTY
CROWN POINT, INDIANA 466307
LAKE COUNTY
FILED FOR RECORD
SEP 6 11 26 AM '88



This Instrument prepared by James E. Daugherty, Attorney At Law
8550 Broadway, Merrillville, Indiana 46410

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